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| APPLICATION NO.               | FILING DATE                | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION NO |  |
|-------------------------------|----------------------------|----------------------|-------------------------|-----------------|--|
| 09/450,511                    | 11/30/1999                 | KAORU ARAI           | P18214                  | 7711            |  |
| 7055                          | 7590 05/19/2003            |                      |                         |                 |  |
| GREENBLUM & BERNSTEIN, P.L.C. |                            |                      | EXAMINER                |                 |  |
| 1950 ROLAI<br>RESTON, V       | ND CLARKE PLACE<br>A 20191 | MAYES, MELVIN C      |                         |                 |  |
|                               |                            |                      | ART UNIT                | PAPER NUMBER    |  |
|                               |                            |                      | 1734                    | 21              |  |
|                               |                            |                      | DATE MAILED: 05/19/2003 |                 |  |

Please find below and/or attached an Office communication concerning this application or proceeding.

|                                                                                                                                                |                                                                                                                                                                                                                                                                             | A 1: 4:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                              | m/s=                  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------|--|--|--|
|                                                                                                                                                | · Advisory Action                                                                                                                                                                                                                                                           | Application No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Applicant(s)                                                                 |                       |  |  |  |
|                                                                                                                                                |                                                                                                                                                                                                                                                                             | 09/450,511                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ARAI ET AL.                                                                  |                       |  |  |  |
|                                                                                                                                                | -                                                                                                                                                                                                                                                                           | Examiner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Art Unit                                                                     |                       |  |  |  |
|                                                                                                                                                |                                                                                                                                                                                                                                                                             | Melvin Curtis Mayes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1734                                                                         |                       |  |  |  |
|                                                                                                                                                | The MAILING DATE of this communication app                                                                                                                                                                                                                                  | ars on the cover she t with the c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | correspondence add                                                           | ress                  |  |  |  |
| There<br>final r<br>condi                                                                                                                      | REPLY FILED 12 May 2003 FAILS TO PLACE TH<br>fore, further action by the applicant is required to a<br>ejection under 37 CFR 1.113 may <u>only</u> be either: (1<br>tion for allowance; (2) a timely filed Notice of Appe<br>ination (RCE) in compliance with 37 CFR 1.114. | void abandonment of this appliced in the substitution of the subst | cation. A proper re<br>ch places the appli                                   | ply to a<br>cation in |  |  |  |
|                                                                                                                                                | PERIOD FOR RE                                                                                                                                                                                                                                                               | PLY [check either a) or b)]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                              |                       |  |  |  |
| b) [<br>Ex                                                                                                                                     | event, however, will the statutory period for reply expire later the ONLY CHECK THIS BOX WHEN THE FIRST REPLY WAS 706.07(f). tensions of time may be obtained under 37 CFR 1.136(a). The dat                                                                                | isory Action, or (2) the date set forth in th<br>an SIX MONTHS from the mailing date o<br>FILED WITHIN TWO MONTHS OF THI<br>te on which the petition under 37 CFR 1.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | f the final rejection.<br>E FINAL REJECTION. \$<br>I36(a) and the appropriat | See MPEP              |  |  |  |
| 37 CFF<br>(b) abo<br>earned                                                                                                                    | een filed is the date for purposes of determining the period of extens 1.17(a) is calculated from: (1) the expiration date of the shortened ve, if checked. Any reply received by the Office later than three mo patent term adjustment. See 37 CFR 1.704(b).               | statutory period for reply originally set in<br>inths after the mailing date of the final reje                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | the final Office action; or<br>ection, even if timely filed,                 | (2) as set forth in   |  |  |  |
| 1                                                                                                                                              | A Notice of Appeal was filed on Appellant's 37 CFR 1.192(a), or any extension thereof (37 CFR                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
| 2.🖂                                                                                                                                            | The proposed amendment(s) will not be entered be                                                                                                                                                                                                                            | ecause:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                              |                       |  |  |  |
| (a                                                                                                                                             | ) $igotimes$ they raise new issues that would require furth                                                                                                                                                                                                                 | er consideration and/or search (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | (see NOTE below);                                                            |                       |  |  |  |
| (b) they raise the issue of new matter (see Note below);                                                                                       |                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
| (c) they are not deemed to place the application in better form for appeal by materially reducing or simplifying the issues for appeal; and/or |                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
| (d) $\square$ they present additional claims without canceling a corresponding number of finally rejected claims.                              |                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
|                                                                                                                                                | NOTE: <u>See Continuation Sheet</u> .                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
| 3.                                                                                                                                             | Applicant's reply has overcome the following reject                                                                                                                                                                                                                         | tion(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                              |                       |  |  |  |
| 4.                                                                                                                                             | Newly proposed or amended claim(s) would canceling the non-allowable claim(s).                                                                                                                                                                                              | be allowable if submitted in a s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | eparate, timely file                                                         | d amendment           |  |  |  |
| 5.🛛                                                                                                                                            | The a) ☐ affidavit, b) ☐ exhibit, or c) ☒ request fo application in condition for allowance because: of                                                                                                                                                                     | r reconsideration has been cons<br>the reasons as set forth in the Fina                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | sidered but does NO<br><u>al Rejection</u> .                                 | OT place the          |  |  |  |
| 6.                                                                                                                                             | The affidavit or exhibit will NOT be considered becaused by the Examiner in the final rejection.                                                                                                                                                                            | cause it is not directed SOLELY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | to issues which we                                                           | re newly              |  |  |  |
| 7.🛛                                                                                                                                            | For purposes of Appeal, the proposed amendment explanation of how the new or amended claims we                                                                                                                                                                              | (s) a)⊠ will not be entered or bould be rejected is provided belo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | )∏ will be entered<br>ow or appended.                                        | and an                |  |  |  |
|                                                                                                                                                | The status of the claim(s) is (or will be) as follows:                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
|                                                                                                                                                | Claim(s) allowed:                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              | •                     |  |  |  |
|                                                                                                                                                | Claim(s) objected to:                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
|                                                                                                                                                | Claim(s) rejected: <u>1-4,6,7,9,10 and 12-20</u> .                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
|                                                                                                                                                | Claim(s) withdrawn from consideration:                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |
| 8.                                                                                                                                             | The proposed drawing correction filed on is                                                                                                                                                                                                                                 | a) ☐ approved or b) ☐ disapp                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | proved by the Exam                                                           | niner.                |  |  |  |
| 9.                                                                                                                                             | Note the attached Information Disclosure Statemer                                                                                                                                                                                                                           | nt(s)( PTO-1449)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              |                       |  |  |  |
| 10.                                                                                                                                            | Other:                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | CURTIS MA<br>5/12RIMARY EXA                                                  | YES<br>MINER          |  |  |  |
| · Dot                                                                                                                                          | and Trademark Office                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                       |  |  |  |

Continuation Sheet (PTO-303) 09/450,511

Application No.

Continuation of 2. NOTE: preparing at least two "porous" ceramic bodies of "porosity of 15 to 70%" raises a new issue that would require further consideration.